

GIC Health Plan Rates – Monthly Rates as of July 1, 2010

For THE TOWN OF WESTON ENROLLEES



Active Employees, Retirees, and Survivors *WITHOUT* MEDICARE

Includes 0.33% Administrative Fee



	Employee and Non-Medicare Retiree/Survivor Pays Monthly %	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$
HEALTH PLAN		Individual Coverage	Family Coverage
Fallon Community Health Plan Direct Care	13%	\$ 54.11	\$129.86
Fallon Community Health Plan Select Care	13%	64.91	155.77
Harvard Pilgrim Independence Plan	15%	90.75	221.66
Harvard Pilgrim Primary Choice Plan	13%	62.42	152.47
Health New England	13%	54.00	133.86
NHP Care (<i>Neighborhood Health Plan</i>)	13%	53.93	142.93
Tufts Health Plan Navigator	15%	87.27	211.90
Tufts Health Plan Spirit	13%	60.03	145.75
UniCare State Indemnity Plan/Basic <i>with</i> CIC (<i>Comprehensive</i>)	33%	266.15	621.38
UniCare State Indemnity Plan/Basic <i>without</i> CIC (<i>Non-Comprehensive</i>)	33%	253.89	592.93
UniCare State Indemnity Plan/Community Choice	15%	61.19	146.86
UniCare State Indemnity Plan/PLUS	15%	84.43	201.48

Retirees and Survivors *WITH* MEDICARE

	Retiree and Survivor Retiree/Survivor Pays Monthly Per Person	
HEALTH PLAN	%	\$
Fallon Senior Plan*	13%	\$ 29.41
Harvard Pilgrim Medicare Enhance	33%	125.22
Health New England MedPlus	13%	47.24
Tufts Health Plan Medicare Complement	13%	45.75
Tufts Health Plan Medicare Preferred*	13%	29.02
UniCare State Indemnity Plan/Medicare Extension (OME) <i>with</i> CIC (<i>Comprehensive</i>)	33%	119.87
UniCare State Indemnity Plan/Medicare Extension (OME) <i>without</i> CIC (<i>Non-Comprehensive</i>)	33%	116.35

* Rates are subject to federal approval and may change January 1, 2011.

Rates are Calculated by the Town of Weston Benefits Office.

Rate questions? Call: 781.893.7320 ext. 307